SALT WATER FISHING CLINIC AT BARRINGTON BEACH

REGISTRATION FORM

The Barrington Recreation Department and ACE Center Hardware is sponsoring a salt water fishing clinic for children 10 -16 years of age. The clinic will be held on Saturday, September 25, 9-11 AM at Barrington Beach. The clinic will be conducted by Rhode Island Saltwater Fishing Association under their Saltwater Fishing program of instruction for young people.

The fee for this program is five dollars per child. These fees will be used to establish a fishing club for young people with parents' support. The clinic will cover the general laws of fishing, how to set your casting pole, surf casting, live bait vs. plugs, how to land a fish and take it off the hook. Parents that have questions can call the Director of Recreation, John Taylor, during office hours Monday thru Friday 9-12 am at 247-1925.

Please make checks payable to "The Town of Barrington" 283 County Road

NAME		AGE	PHONE NUMBER	
ADDRESS				
during the Barrington Recrusuch participation, including and agree to hold harmless understand that registration Recreation and activity directraining for various special	eation Department's salt w g transportation to and fror s all individuals responsible as for children requiring sp ectors. I understand that the needs, but will work with in resical/emotional needs or n	rater fishing clinion such activities, after the conduct ecial attention are Recreation Dendividuals as apprendividuals as apprendividuals.	oval for his/her participation in any/all activity. I assume all risks and hazards incidental, and hereby waive, release, absolve, indementation or activity involving my child. Also, I are reviewed on a case-by-case basis with the partment Staff does not receive specialized propriate. I will provide as much detail as lived so that the staff will be able to provide a	to nnify e d
Signature (Parent/Gua	rdian)			
AMOUNT PAID	CHECK#	CASH	Receipt#	